

Criteria for Notification to Command

DoDI 6490.08 directs that providers shall notify the line commander when one of the following conditions or circumstances is met:

- 1 **Harm to Self:** Serious risk of self-harm by the Service Member either as a result of the condition itself or medical treatment of the condition
- 2 **Harm to Others:** Serious risk of harm to others either as a result of the condition itself or medical treatment of the condition
- 3 **Harm to Mission:** Serious risk of harm to a specific military operational mission. Such serious risk may include disorders that significantly impact impulsivity, insight, reliability, and judgment
- 4 **Special Personnel:** Service member is in the PRP, or a position that has been pre-identified as having mission responsibilities of such sensitivity or urgency that normal notification standards would significantly risk accomplishment
- 5 **In Patient Care:** Service Member is admitted or discharged from any inpatient health or substance abuse treatment facility
- 6 **Acute Medical Conditions Interfering with Duty:** Service Member is experiencing an acute mental health condition or is engaged in an acute medical treatment regimen that impairs ability to perform assigned duties
- 7 **Substance Abuse Treatment Program:** Service Member has entered into or is discharged from an outpatient or inpatient treatment program for substance abuse
- 8 **Other Special Circumstances:** As determined on a case-by-case basis by a health care provider or CO at the O-6 or equivalent level or above
- 9 **Command-Directed Mental Health Evaluation:** Mental health services are obtained as a result of a command-directed mental health evaluation

If the patient meets at least one of the criteria above, the provider should reach out to the embedded provider within the command. If there is no embedded provider within command contact the commander directly.

Notification Criteria
The criteria listed in DoDI 6490.08 serve to indicate when providers should notify a Service member's command

Minimum Notification Standard
DoDI 6490.08 provides guidance on what information should be provided to satisfy the purpose of a disclosure

Clarification of the Minimum Notification Standard

Providers should give detailed information that is related to the potential risks and the required actions to mitigate those risks, but should not provide personal information that is of no practical use to the commander.

The DoDI 6490.08 specifies the following information as "minimally necessary" to satisfy the purpose of the disclosure:

- Diagnosis** - Any recommended duty restrictions
- A description of the prescribed or planned treatment
- Any ways the command can support the Service Member's treatment
- Any applicable duty limitations and implications for the safety of self and others

The DoDI identifies a great deal of information as "minimally necessary." Providers should generally be forthcoming with all relevant information. Additional guidance for information to be shared includes:

- Reasons the patient is considered "at risk"
- Avoid revealing information that is overly personal and has little to do with the patient's specific duty limitations
- What should be done to control the risk
- What was said by the patient to communicate this risk
- What provider and command can do to minimize risk in the future

Best Practices for Sharing Mental Health Information

These best practices offer guidance for provider communications with line leaders to ensure a balance between the privacy of the patient and the safety of the Service member's unit and mission

Recognize the need for balance

DoD guidelines attempt to strike a balance between a commanding officer's "need to know" and the need to preserve the confidentiality of a mental health session

Assume all parties want what is best for the service member

Providers should respond to inquiries with the understanding that the COs as well as the providers have the Service Member's best interests in mind

Know the guidance

Have an understanding of the requirements regarding who can receive information, what approvals are needed, and other requirements

Use embedded medical providers

As embedded providers are part of the operational unit they are able to judge what aspects of a Service Member's condition are most applicable to unit operations

Know your patients' jobs

In the absence of an embedded provider mental health practitioners are required to make every effort to understand the military duties of their patients and the mission of their units



Taking the time to have cooperative discussions with COs, within the boundaries of regulations, has the potential to markedly improve care and ensure that high-risk personnel are identified and appropriately monitored. These positive discussions also improve the relationship between the commander and mental health provider, both of whom are concerned about the health and well-being of their Service Members.

Best Practices

The BUMED Psychological Health Advisory Board (PHAB) has identified some best practices for providers to consider when communicating with commanding officers.

In Summary

One of the cardinal traits of mental health treatment is confidentiality. In order for patients to effectively participate in mental health care, they must feel reasonably certain that the information they share will remain private. Nevertheless, in both military and civilian settings there are limits to this confidentiality.

The PHAB has developed guidance to help mental health providers strike this balance – to preserve confidentiality and protect their patients from inappropriate disclosures of private information, while at the same time sharing information required by the commander to maximize the operational readiness of the unit

Resources for Additional Information

Several policies and instructions have been published to provide guidance for the communication of mental health information to commanding officers. The BUMED Psychological Health Advisory Board's information paper and supporting materials seek to clarify existing guidance for provider ease of reference

Relevant Policies to Reference for More Information:

DoDI 6490.08: Command Notification Requirements to Dispel Stigma in Providing Mental Health Care to Service Members

DoDI 6025.18-R: DoD Health Information Privacy Regulation.

Mental Health Evaluations of Members of the Military Services DoDI 6490.04

For additional guidance, please reference the BUMED Psychological Health Advisory Board's information paper and training materials